

Application No. 09/856,277
Paper dated April 2, 2004
Further response to Office Action of August 19, 2003
Attorney Docket No. 702-010802

REMARKS

This Amendment is supplemental to the Response to Office Action filed January 16, 2004. Claims 13-18 and 21-22 are currently pending in this application. Claim 13 has been amended. Support for the language "two or more doses daily" can be found on page 4, lines 10-14 *et seq.* Support for the language "skeletal muscle" can be found on page 1, line 8 *et seq.* Support for the language "subjected to immobilization" can be found on page 9, line 26 *et seq.* Support for the language "continues during the rehabilitation period up to about ten weeks" can be found on page 10, line 7 *et seq.* Support for the language "one dose daily" can be found on page 19, line 36. No new matter has been added. In view of this amendment and of the following remarks, Applicant believes that all the asserted rejections are in condition for withdrawal and all the claims are in condition for allowance.

Claims 13-18 and 21-22 stand rejected under 35 U.S.C. § 112, first paragraph, for purported lack of enablement. In a telephone conference with the Examiner, the Examiner indicated that the enablement rejection would be overcome if the claims were amended to recite "a method of treating" muscle disuse syndrome and not to a "method of preventing." Accordingly, Applicant has deleted the term "prevention" from independent claims 13 and 22.

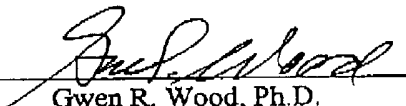
Claims 13, 15-18 and 21 stand rejected under 35 U.S.C. § 102(b) for purported anticipation by Elgebaly; and claims 13-18 and 21 stand rejected under 35 U.S.C. § 103(a) for purported obviousness over Pischel et al. in view of Howard et al. In the telephone conference, the Examiner stated that amending the claims to recite specifically the type of muscles that are to be treated as well as the specific dosage amounts administered would distinguish this invention over the prior art. Accordingly, Applicant has amended independent claim 13 to recite a method of treating skeletal muscle subjected to immobilization comprising administering two or more doses daily in unit dosage form of a creatine compound wherein the dosage amount decreases to one dose daily after the end of the immobilization period and continues during the rehabilitation period for up to about ten weeks.

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Based on the foregoing, Applicant now believes that claim 13 (and therefore claims 14-18 and 21, which depend either directly or indirectly from claim 13) and claim 22 now are enabled by the specification and patentable over the cited prior art. Reconsideration of the rejections and allowance of pending claims 13-18 and 21-22 are respectfully requested.

Respectfully submitted,

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